PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

07

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

maintenance fee notification	ns.		specifying a new	correspondence address	s; and/or (b) indicating a sep-	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must				
32294 7590 04/26/2005				have its own certificate of mailing or transmission.			
• '	ERS & DEMPSEY L	L.P. / O ' '	. E.	Ce	ertificate of Mailing or Tran	smission	
14TH FLOOR				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile			
8000 TOWERS CI		JUL 2	0 2005 addressed to the		Mail Stop ISSUE FEE address above, or being facsimile USPTO (703) 746-4000, on the date indicated below.		
TYSONS CORNE	R, VA 22182	2 301 2	<i>ξ</i> ;/	transmitted to the US	F10 (703) 740-4000, on the c	(Depositor's name)	
/21/2005 MBEYENE2 000	00248 10804099	PAT TRAI	DARK OF			(Signature)	
FC:1501	1400.00 OP	MAI	UEWEAR		.	(Date)	
FC ADDICATION NO.	FILING BOTEO OF	FIRST NAMED INVEN		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/804,099	03/19/2004	Jari Makine			59643.00373	7092	
TITLE OF INVENTION: M	MULTIRATE SPEECH COD	ECS					
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	E I	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	07/26/2005	
EXAMINER		ART UNIT	T (CLASS-SUBCLASS			
BRINEY III, WALTER F		2644		379-387010	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2& DEMPSEY LLP				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO BI	E PRINTED ON TH	HE PATENT (print	or type)			
PLEASE NOTE: Unless		low no assignee da	ata will annear on	the natent If an assign	nee is identified below, the d	locument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
NOKIA CORPO	RATION		Espoo, Fi	nland			
Please check the appropriate	assignee category or categor	ies (will not be prin	ited on the patent):	Individual 📛 C	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:		Payment of Fee(s):			-	
Issue Fee A check in the amount of the fee(s) is enclosed. Check No. 13145							
	mall entity discount permitted			dit card. Form PTO-203			
Advance Order - # of	Copies10	×	The Director is	hereby authorized by o	charge the required fee(s), or (enclose an extra c	credit any overpayment, to	
5. Change in Entity Status	(from status indicated above)		seposit recount re		(chelose all extra e	opy of this form).	
	MALL ENTITY status. See 3		b. Applicant is r	o longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issuublication Fee (if required) words of the Unit of States Pate	e Fee and Publication Ill not be accepted in Int and Trademark C	on Fee (if any) or to from anyone other office.	o re-apply any previous than the applicant; a reg	ly paid issue fee to the applications attorney or agent; or the	ation identified above. he assignee or other party in	
Authorized Signature					y 20, 2005		
Typed or printed name	Douglas H. Gold	lhush		Registration No. 33, 125			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.